

**TRANSMITTAL AND NOTICE OF APPROVAL OF  
STATE PLAN MATERIAL**

FOR: HEALTH CARE FINANCING ADMINISTRATION

1. TRANSMITTAL NUMBER:

0 1 — 0 2 5

2. STATE:

Minnesota

3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)

TO: REGIONAL ADMINISTRATOR  
HEALTH CARE FINANCING ADMINISTRATION  
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE

October 1, 2001

5. TYPE OF PLAN MATERIAL (Check One):

☐ NEW STATE PLAN

☐ AMENDMENT TO BE CONSIDERED AS NEW PLAN

☒ AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION:

42 CFR 447.252

7. FEDERAL BUDGET IMPACT:

a. FFY '02 \$ 13,750 13,631,000  
b. FFY '03 \$ 0

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:

Att. 4.19-A (Inpat. Hospital), pp. 1-50

9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable):

same

10. SUBJECT OF AMENDMENT:

Methods and Standards for Determining Payment Rates for Inpatient Hospital Services Provided by Non-State Owned Facilities

11. GOVERNOR'S REVIEW (Check One):

☒ GOVERNOR'S OFFICE REPORTED NO COMMENT

☐ OTHER, AS SPECIFIED:

☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED

☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL:

*Ann Berg*

13. TYPED NAME:

Mary B. Kennedy

14. TITLE:

Medicaid Director

15. DATE SUBMITTED:

December 21, 2001

16. RETURN TO:

Stephanie Schwartz  
Federal Relations  
Minnesota Department of Human Services  
444 Lafayette Road No.  
St. Paul, MN 55155-3853

**FOR REGIONAL OFFICE USE ONLY**

17. DATE RECEIVED:

12-26-01

18. DATE APPROVED:

6/13/02

**PLAN APPROVED - ONE COPY ATTACHED**

19. EFFECTIVE DATE OF APPROVED MATERIAL:

October 1, 2001

20. SIGNATURE OF REGIONAL OFFICIAL:

*Cheryl A. Harris*

21. TYPED NAME:

Cheryl A. Harris

22. TITLE: Associate Regional Administrator  
Division of Medicaid and Children's Health

23. REMARKS:

**RECEIVED**

DEC 26 2001

DMCH - MI/MN/WI

**MINNESOTA  
MEDICAL ASSISTANCE**

Federal Budget Impact of Proposed State Plan Amendment TN 01-25  
Attachment 4.19-A: Increase in Medicaid Payment Rate for Medical Education

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Effective October 1, 2001, the payment rates for medical education for inpatient hospitals will be increased for Federal Fiscal Year 2002. The total increase will be \$27,263,047.94. A summary of the costs follows.

	(in 1000's)	
	<u>FFY '02</u>	<u>FFY '03</u>
Total cost	\$27,263	\$0
FFP	50.00%	-
Total MA Cost	\$27,263	\$0
State share	\$13,631	\$0
Federal share	\$13,631	\$0

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ATTACHMENT 4.19-A  
Inpatient Hospital  
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**Methods and Standards for Determining Payment Rates for Inpatient  
Hospital Services Provided by Non-State Owned Facilities**

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Section 11.0	Recapture of Depreciation
Section 12.0	Payment Procedures
Section 13.0	Disproportionate Population Adjustment
Section 14.0	Appeals
Section 15.0	Other Payment Factors

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## SECTION 1.0 PURPOSE AND SCOPE

The Minnesota inpatient hospital payment system under the Medical Assistance Program is authorized by state law. Payment rates are prospectively established on a per admission or per day basis under a diagnostic related group (DRG) system that condenses Medicare categories into Minnesota diagnostic categories. Rates are differentiated by eligibility (Medical Assistance, Minnesota Family Investment Program or MFIP, Medical Assistance non-MFIP) and specialty (Rehabilitation Distinct Part, Neonatal Transfer). The system provides for the payment of operating and property costs with additional payments including a disproportionate population adjustment and an appeals mechanism.

The rate setting methodology is based on the cost finding and allowable cost principles of the Medicare program. The rates are established for each calendar year using hospital specific Medical Assistance claims data and cost that is trended for inflation to the current year from a base year. Rates are rebased to more current data every two years.

The methodology described in this Attachment is effective for admissions occurring on or after October 25, 1993.

To be eligible for payment, inpatient hospital services must be medically necessary.

Minnesota has in place a public process that complies with the requirements of Section 1902(a)(13)(A) of the Social Security Act.

## SECTION 2.0 DEFINITIONS

**Accommodation service.** "Accommodation service" means those inpatient hospital services included by a hospital in a daily room charge. They are composed of general routine services and special care units. These routine and special care units include the nursery, coronary, intensive, neonatal, rehabilitation, psychiatric, and chemical dependency units.

**Adjusted base year operating cost.** "Adjusted base year operating cost" means a hospital's allowable base year operating cost per admission or per day, adjusted by the hospital cost index.

**Admission.** "Admission" means the time of birth at a hospital or the act that allows a recipient to officially enter a hospital to receive inpatient hospital services under the supervision of a physician who is a member of the medical staff.

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**Allowable base year operating cost.** "Allowable base year operating cost" means a hospital's base year inpatient hospital cost per admission or per day that is adjusted for case mix and excludes property costs.

**Ancillary service.** "Ancillary service" means inpatient hospital services that include laboratory and blood, radiology, anesthesiology, pharmacy, delivery and labor room, operating and recovery room, emergency room and outpatient clinic, therapy, medical supplies, renal dialysis, psychiatric, and chemical dependency services customarily charged in addition to an accommodation service charge.

**Base year.** "Base year" means a hospital's fiscal year that is recognized by Medicare, or a hospital's fiscal year specified by the commissioner if a hospital is not required to file information with Medicare, from which cost and statistical data are used to establish rates.

**Case mix.** "Case mix" means a hospital's admissions distribution of relative values among the diagnostic categories.

**Charges.** "Charges" means the usual and customary payment requested by the hospital of the general public.

**Cost outlier.** "Cost outlier" means the adjustment included in the relative value that is applied to the admission and outlier rates so that payment is adjusted for exceptionally high cost stays. The adjustment is applied to all admissions with an above average cost, including patients that have not yet attained the age of one in all hospitals and that have not yet attained the age of six in disproportionate population hospitals.

**Cost-to-charge ratio.** "Cost-to-charge ratio" means a ratio of a hospital's inpatient hospital costs to its charges for inpatient hospital services.

**Day outlier.** "Day outlier" means an admission where the length of stay exceeds the mean length of stay for neonate and burn diagnostic categories by one standard deviation, and in the case of all other diagnostic categories by two standard deviations.

**Diagnostic categories.** "Diagnostic categories" means the diagnostic classifications containing one or more diagnostic related groups (DRGs) used by the Medicare program. The DRG classifications must be assigned according to the base year program and specialty groups with modifications as specified in items A to E.

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**A. Diagnostic categories eligible under the Medical Assistance non-Minnesota family investment program.** The following diagnostic categories are for persons eligible under Medical Assistance non-MFIP except as provided in items B, C or D:

DIAGNOSTIC CATEGORIES	DRG NUMBERS WITHIN DIAGNOSTIC CATEGORIES	INTERNATIONAL CLASSIFICATION OF DISEASES, 9th Ed. CLINICAL MODIFICATIONS
<b>A. Nervous System Conditions</b>		
(1) Treated with Craniotomy, Age >17	001, 002	
(2) Treated with Craniotomy, Age 0-17	003	
(3) [Reserved for future use]		
(4) [Reserved for future use]		
(5) [Reserved for future use]		
(6) Nervous System Neoplasms	010, 011	
(7) [Reserved for future use]		
(8) [Reserved for future use]		
(9) [Reserved for future use]		
(10) [Reserved for future use]		
(11) [Reserved for future use]		
(12) [Reserved for future use]		
(13) [Reserved for future use]		
(14) [Reserved for future use]		
(15) [Reserved for future use]		
(16) Treated with Other Surgical Procedures	004, 005, 007	
(17) Peripheral, Cranial, and Other Nerve Procedure without CC	008	
(18) Other Nervous System Diseases Treated Without Surgery	013, 015, 017	
(19) Spinal Disorders/Injuries and Nervous System Infection	009, 020	
(20) Specific Cerebral Vascular and Cranial/Peripheral Nerve Disorders	014, 018, 019	
(21) Degenerative and Nonspecific Cerebral Vascular Disorders with CC	012, 016 024-026	
(22) Seizure and Headache		
(23) Traumatic Stupor with Coma > 1 Hr, and Coma < 1 Hr, Age > 17 with CC	027, 028	

- (24) Viral Meningitis, Hypertensive Encephalopathy, Concussion  
Age > 17 with CC, Other Stupor and Coma 021-023, 029, 031
- (25) Concussion, Age 0-17 and Age > 17 without CC 032, 033
- (26) Stupor and Coma < 1 Hr, Age 0-17 and Other Disorders of the Nervous System 030, 034, 035

## B. Eye Diseases and Disorders 036-048

## C. Ear, Nose, Throat, and Diseases and Disorders

- (1) Treated with Tonsillectomy/Adenoidectomy Only 059, 060
  - (2) Treated with Myringotomy with Tube Insertion, Age 0-17 062
  - (3) Otitis Media and URI 068-070
  - (4) Dental and Oral Disorders 185-187
  - (5) [Reserved for future use]
  - (6) Other Ear, Nose, Throat and Mouth Conditions 049-058, 061, 063-067, 071-074, 168, 169
- Codes in DRG  
049 except  
20.96-20.98

## D. Respiratory System Conditions

- (1) Treated with Ventilator Support for < 96 Hours 475 Excludes 96.72
- (2) [Reserved for future use]
- (3) Treated with Ventilator Support for 96 + Hours 475 Includes 96.72
- (4) Treated with Tracheostomy Except For Face, Mouth, and Neck Diagnoses 483
- (5) [Reserved for future use]
- (6) Respiratory Neoplasms 082
- (7) [Reserved for future use]
- (8) [Reserved for future use]
- (9) [Reserved for future use]
- (10) Treated with Tracheostomy for Face, Mouth, and Neck Diagnoses 482
- (11) Simple Pneumonia and Pleurisy, Age 0-17 and Age >17 without CC 090,091
- (12) Major Chest Procedures and OR Procedures with CC 075, 076
- (13) Major Respiratory Diseases and Disorders Treated with Surgery 078, 079, 087, 092, 101

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- |      |   |  |
|------|---|--|
| (14) | Other OR Procedures without CC                                  | 077                                    |
| (15) | Specific Respiratory System Diseases and Other Diseases with CC | 080, 081, 083, 085, 088, 089, 094, 099 |
| (16) | Respiratory System Diseases without CC and Bronchitis, Age >17  | 084, 086, 093 095-097, 100, 102        |

E. Circulatory System Conditions (1)

- |      |  |                                  |
|------|--|----------------------------------|
|      | [Reserved for future use]                                    |                                  |
| (2)  | [Reserved for future use]                                    |                                  |
| (3)  | Percutaneous Cardiac and Other Vascular Procedures           | 111, 112, 114, 116-120, 479      |
| (4)  | Major Cardiac Surgeries                                      | 104-106, 108                     |
| (5)  | Other Cardiac Interventional and Surgical Procedures         | 107, 109, 110, 115               |
| (6)  | [Reserved for future use]                                    |                                  |
| (7)  | [Reserved for future use]                                    |                                  |
| (8)  | [Reserved for future use]                                    |                                  |
| (9)  | [Reserved for future use]                                    |                                  |
| (10) | Major Cardiac Disorders Treated without Surgery              | 122-125, 127, 129, 137, 138, 144 |
| (11) | Acute MI, Congenital Heart Disease with CC, and Endocarditis | 121, 126, 135                    |
| (12) | Other Circulatory Conditions                                 | 132-134, 136, 139-143, 145       |
| (13) | Deep Vein Thrombophlebitis and Peripheral Vascular Disorders | 128, 130, 131                    |
| (14) | Procedures for Major Vascular Diseases and Conditions        | 113, 478                         |

F. Digestive System Diseases and Disorders

- |     |   |                  |
|-----|---|------------------|
| (1) | Treated with Anal and Stomal Procedures                       | 157-158          |
| (2) | Treated with Hernia Procedures                                | 159-163          |
| (3) | Treated with Appendectomy with Compl. Prin Diag or CC         | 164-166          |
| (4) | Treated with Appendectomy without Compl. Prin Diag or CC      | 167              |
| (5) | Treated with Other Surgical Procedure                         | 146-156, 170-171 |
| (6) | Esophagitis, Gastroent, or Misc Digestive Disorders, Age > 17 | 182-183          |
| (7) | Other Digestive System Condition                              | 172-181, 188-190 |



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G. Hepatobiliary System Conditions

- (1) [Reserved for future use]
  - (2) [Reserved for future use]
  - (3) Cirrhosis and Alcoholic Hepatitis 202
  - (4) Malignancy of Hepatobiliary System or Pancreas 203
  - (5) Disorders of the Pancreas Except Malignancy 204
  - (6) Other Disorders of the Liver 205, 206
  - (7) Disorders of the Biliary Tract 207, 208
  - (8) Treated with Surgical Procedure 191-201, 493  
494
- Codes in DRG  
191 except  
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H. Diseases and Disorders of the Musculoskeletal System and Connective Tissues

- (1) Treated with Major Joint and Limb Reattachment Procedures 209, 472, 491
- (2) Treated with Hip and Femur Procedures or Amputation 210-213
- (3) [Reserved for future use]
- (4) [Reserved for future use]
- (5) Treated with Wound Debrid or Skin Graft Except Hand 217
- (6) Treated with Lower Extrem and Humer Proc Except Hip, Foot, Femur 218-220
- (7) [Reserved for future use]
- (8) Treated with Upper Extremity Procedure 223-224
- (9) Treated with Foot Procedure 225
- (10) Treated with Soft Tissue Procedure 226-227
- (11) [Reserved for future use]
- (12) [Reserved for future use]
- (13) [Reserved for future use]
- (14) [Reserved for future use]
- (15) Other Musculoskeletal System and Connective Tissues Conditions 235-256
- (16) [Reserved for future use]
- (17) Spinal Fusion: Combined Anterior/Posterior and Fusion with CC 496, 497
- (18) Treated with Back and Neck Procedures 498, 499
- (19) Treated with Knee Procedure 501-503
- (20) Treated with Biopsy or Other Surgical Procedures 216, 233, 234

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- |      |  |               |
|------|--|---------------|
| (21) | Hand and Wrist Procedures and<br>Carpal Tunnel Release             | 006, 228, 229 |
| (22) | Treated with Local Excision and<br>Removal of Internal Fix Devices | 230, 231      |
| (23) | Arthroscopy, Other Back and Neck<br>Procedures without CC          | 232, 500      |

I. Diseases and Disorders of the Skin, Subcutaneous  
Tissue, and Breast

- |     |   |                            |
|-----|---|----------------------------|
| (1) | Treated with Mastectomy for<br>Malignancy                 | 257-260                    |
| (2) | Treated with Skin Graft or<br>Debridement                 | 263-266                    |
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J. Endocrine, Nutritional, and Metabolic Diseases  
and Disorders

- |     |   |                      |
|-----|---|----------------------|
| (1) | Treated with Major Surgical<br>Procedure                  | 285-288              |
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| (5) | [Reserved for future use]                                 |                      |
| (6) | Other Endocrine, Nutritional,<br>and Metabolic Conditions | 289-293,<br>300, 301 |
- Codes in DRG  
292 except 52.80-  
52.86

K. Kidney and Urinary Tract Conditions

- |     |   |         |
|-----|---|---------|
| (1) | Treated with Kidney, Ureter, or<br>Major Bladder Procedure          | 303-305 |
| (2) | Treated with Prostatectomy, Minor<br>Bladder, or Urethral Procedure | 306-314 |
| (3) | Treated with Other Surgical<br>Procedure                            | 315     |
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L. Male Reproductive System Conditions 334-352

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M. Female Reproductive System Conditions

- |     |   |                  |
|-----|---|------------------|
| (1) | Treated with Tubal Interruption<br>Procedure                | 361, 362         |
| (2) | Treated with D&C, Conization,<br>or Radio-Implant           | 363, 364         |
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N. Pregnancy Related Conditions

- |      |  |         |
|------|--|---------|
| (1)  | [Reserved for future use]  |         |
| (2)  | [Reserved for future use]  |         |
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O. [Reserved for future use]

P. Blood and Immunity Disorders

- |     |   |          |
|-----|---|----------|
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Q. Myeloproliferative Diseases and Disorders,  
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Other Neoplasms

- (1) [Reserved for future use]
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U. [Reserved for future use]

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V. Toxic Effects of Drugs

- |     |  |         |
|-----|--|---------|
| (1) | Treated with Surgical Procedure                              | 439-443 |
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- |     |  |               |
|-----|--|---------------|
| (1) | [Reserved for future use]                            |               |
| (2) | [Reserved for future use]                            |               |
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BB. [Reserved for future use]

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- |     |                                |     |
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DD. Vaginal Delivery

- (1) [Reserved for future use]
- (2) Without Complicating Diagnosis  
or Operating Room Procedures 373
- (3) With Operating Room Procedure 374-375
- (4) With Complicating Diagnosis 372

EE. [Reserved for future use]

FF. Depressive Neurosis 426

GG. Psychosis

- (1) (Age 0-17) 430
- (2) (Age > 17) 430

HH. Childhood Mental Disorders 431

II. Operating Room Procedure Unrelated to Principal Diagnosis

- (1) Extensive 468
- (2) Nonextensive 476, 477

JJ. [Reserved for future use]

KK. Extreme Immaturity

- (1) (Weight < 750 Grams) 386 76501, 76502
- (2) [Reserved for future use]
- (3) [Reserved for future use]
- (4) (Weight 750-1499 Grams) 386 76503, 76504, 76505  
387 76500
- (5) Neonate Respiratory Distress  
Syndrome 386 Codes in DRG 386  
except 76501 to 76505

LL. Prematurity with Major Problems

- (1) (Weight < 1250 Grams) 387 76511, 76512,  
76513, 76514
- (2) (Weight 1250 to 1749 Grams) 387 76506, 76510  
76515, 76516
- (3) (Weight >1749 Grams) 387 Codes in DRG 387  
except 76500, 76506,  
76510 to 76516

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MM. Prematurity without Major Problems 388

NN. Full Term Neonates

(1) With Major Problems (Age 0)	389
(2) With Other Problems	390

OO. Multiple Significant Trauma 484-487

PP. Implantation or Replacement of Cochlear Prosthetic Device	049	Includes 20.96-20.98 only
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QQ. Normal Newborns 391

RR. Neonates, Died on Birth Date	385	Includes neonates who expire in the birth hospital, and discharge date is the same as the birth date
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SS-TT. [Reserved for future use]

UU. Organ Transplants

(1) Kidney and Pancreas Transplant	302, 191, 292	DRG 191, 292 includes 52.80-52.86 only
(2) Heart, liver, Bone Marrow, Lung, and Bowel Transplants	103, 480, 481, 495	Bowel transplant includes any DRG with procedure 46.99 and Revenue Code 811 or 812 only
(3) [Reserved for future use]		
(4) [Reserved for future use]		
(5) [Reserved for future use]		

VV. Conditions Originating in the Perinatal Period (Age >0)	389
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WW. Human Immunodeficiency Virus

- |     |   |     |
|-----|---|-----|
| (1) | Treated with Extensive Operating Room Procedure | 488 |
| (2) | With Major Related Condition                    | 489 |
| (3) | With or Without Other Related Condition         | 490 |

**B. Diagnostic categories eligible under the Minnesota family investment program.** The following diagnostic categories are for persons eligible for Medical Assistance under MFIP except as provided in items C or D:

DIAGNOSTIC CATEGORIES	DRG NUMBERS WITHIN DIAGNOSTIC CATEGORIES	INTERNATIONAL CLASSIFICATION OF DISEASES, 9th Ed. CLINICAL MODIFICATIONS
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A. Nervous System Conditions

- |      |   |                                |                                  |
|------|---|--------------------------------|----------------------------------|
| (1)  | [Reserved for future use]                                   |                                |                                  |
| (2)  | [Reserved for future use]                                   |                                |                                  |
| (3)  | Treated with Craniotomy and Cochlear Implants               | 001-003,<br>049                | 049 includes<br>20.96-20.98 only |
| (4)  | [Reserved for future use]                                   |                                |                                  |
| (5)  | [Reserved for future use]                                   |                                |                                  |
| (6)  | [Reserved for future use]                                   |                                |                                  |
| (7)  | [Reserved for future use]                                   |                                |                                  |
| (8)  | [Reserved for future use]                                   |                                |                                  |
| (9)  | [Reserved for future use]                                   |                                |                                  |
| (10) | Seizure and Headache, Age > 17                              | 024, 025                       |                                  |
| (11) | Seizure and Headache, Age 0-17                              | 026                            |                                  |
| (12) | [Reserved for future use]                                   |                                |                                  |
| (13) | [Reserved for future use]                                   |                                |                                  |
| (14) | [Reserved for future use]                                   |                                |                                  |
| (15) | [Reserved for future use]                                   |                                |                                  |
| (16) | Cerebral Vascular and CNS Disorders Treated without Surgery | 013-015, 017,<br>019, 021, 022 |                                  |
| (17) | Treated with Other Surgical Procedures                      | 004, 007, 008                  |                                  |
| (18) | Neoplasms and Other Nervous System Disorders                | 010, 011, 034, 035             |                                  |